\_\_\_\_\_\_09/845,6/8
Application or Docket Number
60224/04529

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |   |   |               |                               |                      |                  |        | SMALL ENTITY TYPE   |                        |       | OTHER THAN<br>OR SMALL ENTITY |                        |  |
|---|---|---|---------------|-------------------------------|----------------------|------------------|--------|---------------------|------------------------|-------|-------------------------------|------------------------|--|
| TOTAL CLAIMS  |   |   | 25            |                               |                      | D-10-1           |        | RATE                | FEE                    |       | RATE                          | FEE                    |  |
| FOR   |   |   | NUMBER FILED  |                               | NUMBER EXTRA         |                  |        | BASIC FEE           | 355.00                 | OR    | BASIC FEE                     | 710.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |   |   | 7 5 minus 20= |                               | • 5                  |                  |        | X\$ 9=              |                        | OR    | X\$18=                        | 90                     |  |
| <u> </u>  | DEPENDENT CL  |   |               | nus 3 =                       |                      |                  |        | X40=                |                        | OR    | X80=                          | 80                     |  |
| MU  | ILTIPLE DEPEN   | RESENT                                    |               |                               |                      |                  | +135=  |                     | OR                     | +270= |                               |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2              |   |   |               |                               |                      |                  | İ      | TOTAL               |                        | OR    | TOTAL                         | 880                    |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)                          |   |   |               |                               |                      |                  |        | SMALL               | ENTITY                 | OR    | OTHER<br>SMALL                |                        |  |
|   | 1   | CLAIMS                                    | 1 -           | HIGH                          |                      | (Column 3)       | )<br>1 | OMALL               |                        | ) (   | OIIIALL I                     |                        |  |
| AMENDMENT A   |   | REMAINING<br>AFTER<br>AMENDMENT           |               | NUM<br>PREVIO<br>PAID         | BER<br>OUSLY         | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | . 25                                      | Minus         | * 0                           | 25                   | - /              |        | X\$ 9=              |                        | OR    | X\$18=                        |                        |  |
|   | Independent   | • 4                                       | Minus         | ***                           | 4                    | = /              |        | X40=                |                        | OR    | X80=                          |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |   |               |                               |                      |                  |        | +135=               |                        | OR    | +270=                         |                        |  |
|   |   |   |               |                               |                      |                  |        | TOTAL<br>ADDIT. FEE |                        | OR    | TOTAL<br>ADDIT, FEE           |                        |  |
| (Column 1) (Column 2) (Column 3)  |   |   |               |                               |                      |                  |        |                     |                        |       |                               |                        |  |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGH<br>NUM<br>PREVIO<br>PAID | IBER<br>OUSLY        | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | •   | Minus         | **                            |                      | =                | _      | X\$ 9=              |                        | OR    | X\$18=                        |                        |  |
|   | Independent   | NTATION OF M                              | Minus         | ***                           | F.CL AINA            | =                | _      | X40=                |                        | OR    | X80=                          |                        |  |
| <u> </u>  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |               |                               |                      |                  |        |                     |                        | OR    | +270=                         |                        |  |
|   |   |   |               |                               |                      |                  |        | TOTAL<br>ADDIT. FEE |                        | OR    | TOTAL<br>ADDIT. FEE           |                        |  |
| (Column 1) (Column 2) (Column 3)  |   |   |               |                               |                      |                  |        |                     |                        |       |                               |                        |  |
| ENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>BER<br>DUSLY | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
| AMENDMENT C   | Total   | •   | Minus         | **                            |                      | =                |        | X\$ 9=              |                        | OR    | X\$18=                        |                        |  |
|   | Independent   | •   | Minus         | ***                           |                      | =                | ]      | X40=                |                        |       | X80=                          |                        |  |
|   | FIRST PRESE   | NTATION OF MU                             | JLTIPLE DEF   | ENDENT                        | CLAIM                |                  | ] }    | A+0=                |                        | OR    | 700=                          |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |   |               |                               |                      |                  |        |                     |                        | OR    | +270=                         |                        |  |
| ••••  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" IT This independent) is the highest number found in the appropriate box in column 1. |   |               |                               |                      |                  |        |                     |                        |       |                               |                        |  |

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